UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF ALABAMA NORTHERN DIVISION

Barbara S. LEWIS)	
)	
Plaintiff)	
)	
v.)	Case No. 2:07-cv-18 MHT
)	
UNITED STATES of America)	Demand for Jury Trial
)	
Defendant)	

MOTION FOR SUMMARY JUDGMENT

Plaintiff moves the Court to enter, pursuant to FED. R. CIV. P. 56(c), a summary judgment in Plaintiff's favor for relief demanded in her complaint awarding her a tax refund for 2003 in the amount of \$2,570 plus interest and for grounds of her motion says that there is no genuine issue as to any material fact and that she is entitled to a judgment as a matter of law.

This motion is based upon admissions of Defendant contained in its Answer and the affidavits of Plaintiff Barbara Lewis and counsel James M. Sizemore, Jr.

/s/ James M. Sizemore, Jr.

James M. Sizemore, Jr. (SIZ001) Attorney for Plaintiffs 792 Commerce Drive, Suite 104 Alexander City, AL 35010 256/409-1985; Fax 256/409-1987 E-mail: jamessizemore@charter.net

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on this the 11th day of April, 2007, I served a copy of the foregoing Motion for Summary Judgment with the Clerk of the Court using the CM/ECF system that will send notice to the following:

Honorable Gregory L. Jones, Esq. Trial Attorney, Tax Division U.S. Department of Justice

/s/ James M. Sizemore, Jr.

James M. Sizemore, Jr., Of Counsel

UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF ALABAMA NORTHERN DIVISION

Barbara S. LEWIS)	
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UNITED STATES of America)	Demand for Jury Trial
)	•
Defendant)	

AFFIDAVIT

Comes now Plaintiff Barbara Lewis, who is known to me and who, being first duly sworn, deposes and says:

- 1. My name is Barbara A. Lewis, and I am over 19 years of age and qualified to testify in court to the matters stated herein. I am the same person as "Barbara S. Lewis" shown in the style of this case. My correct middle initial is "A," the "S" being a typographical error. At all times relevant to this proceeding, I was a resident of Autauga County, Alabama, within the jurisdiction of the United States District Court for the Middle District of Alabama.
- 2. I make this affidavit in support of a Motion for Summary Judgment filed on my behalf in this case.

- 3. In 2006, I filed my 2003 income tax return. I attach to this affidavit a copy of the return that I filed and mark it Exhibit 1. Before filing this return, I examined it and its accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. This return consists of five (5) pages numbered 22-25 (inclusive) and 27.
- 4. This return claimed a refund of \$2,895 that consisted of \$325 withheld from my wages during 2003 and a \$2,570 earned income credit.
- 5. During 2003, my two (2) daughters lived with me. Their initials are SR and AR. I provided the IRS with their names and tax identifying numbers. They are my natural children who were born in 1993 and 1997 respectively. At the end of 2003, both of them were under 19 years of age.
- 6. During 2003, both of my children lived with me for all 365 days of the year. Our address was for the entire year was Prattville, AL 36067.
- 7. By letter dated July 3, 2006, the IRS notified me that it delayed sending me the earned income credit portion of my refund. I attach the IRS letter to this affidavit marked as Exhibit 2 numbered page 20. It had an enclosure that I also attach headed "Supporting Documents For Taxpayers Claiming EIC on the Basis of a Qualifying Child(ren)."

8. The IRS form instructed me as follows:

If the child is your:	Additional	Then send photocopies of documents for the
	Requirement	tax year 2003
Son or daughter	None	IRS will confirm the relationship. Send nothing
		at this time, however, you may be asked for
		additional information at a later time. GO TO
		AGE TEST
Under age 19 at the end	None	IRS will confirm. Send nothing at this time.
of tax year 2003		You may be asked for additional information at
		a later time. GO TO RESIDENCY TEST
Related to you as	The child lived	To show that the child lived with you for
described in the	with you in the	more than half of 2003 send: School
Relationship Test [and]	United States for	records
	more than half of	
	tax year 2003	

- 9. The IRS sent me another letter dated July 10, 2006, advising that it applied the portion of the refund I requested represented by amounts withheld from my wages in the amount of \$325 to a prior tax year liability. I enclose a copy of that document marked as Exhibit 3 numbered page 19.
- 10. In response to the IRS request, my counsel sent the IRS the school records for my older daughter, SR, reflecting that she lived with her mother (me) in Prattville, AL during both the 2002/2003 and the 2003/2004 school year. He sent school records for my younger daughter, AR, showing that she lived with her mother (me) during the 2003/2004 school year. She did not enter school until the fall of 2003. I attach copies of the documents provided the IRS to this affidavit as Exhibits 4 and 5 numbered pages 16-17.

- 11. In a letter dated August 25, 2006, the IRS acknowledged receipt of the information that I provided, but disallowed the entire amount of my earned income credit refund. I attach this document as Exhibit 6 numbered pages 11-14 (including the reverse side of page 13). The portion of this Exhibit numbered page 14 refers on its face to the tax year ending December 31, 2005, though this document came with the other documents relating to the tax year ending December 31, 2003. I believe that the IRS intended to refer to the tax year ending December 31, 2003, in this document also.
- 12. The IRS sent me Form 5564 dated September 15, 2006, the official Notice of Deficiency advising that, while I owed no additional tax for 2003, my request for refund of the earned income credit was denied. I attach a copy of this document marked as Exhibit 7 numbered page 6 with its attached Forms 4549 and 886-A numbered pages 7-8, both with the reverse as well as the obverse.
- 13. The Notice of Deficiency arrived with a letter dated September 15, 2006, that I marked as Exhibit 8 numbered page 5, both obverse and reverse. Rather than pursuing this matter in Tax Court, I chose to file this suit in district court.
- 14. For the tax year 2003, I was an "eligible individual" within the definition contained in 26 U.S.C. §32(c)(1). During 2003, both of my children met the definition of "qualifying child" contained in 26 U.S.C. §32(c)(3).

- 15. No other person met the requirements to use my children in order to claim an earned income tax credit.
- 16. For the tax year 2003, I am entitled to a refund of \$2,570 in earned income credit, plus interest.

Filed 04/11/2007

STATE OF ALABAMA **AUTAUGA COUNTY**

Before me, the undersigned notary public, personally appeared Barbara A. Lewis, who is known to me, and who, being first duly sworn, deposes and says that the facts contained in the foregoing affidavit are true and correct.

DONE this Add day of April, 2007.

My commission expires: 3, 16, C8

Ferm	Department of the Treasury- Interna	il Revenue Service				
1040A	U.S. Individual Incor	ne Tax Return (99)	2003 iRS U	se Only- Do	not write or staple in	this space.
Label	Your first name and initial	Last name		,	OMB No. 1545	-0085
	1				Your social security	number
(See page 19.) L A B	BARBARA A	LEWIS			**********	!
E	If a joint return, spouse's first name and	initial Last name			Spouse's social securi	ity number
Inc label						
Otserwise E	Home address (number and street), if yo	u have a P.O. box, see page 20.	Apt.	no.	A Importo	A
ptease print R					▲ Importa	
or syse.	City, town or post office, state, and ZIP PRATTVILLE AL 36067	code. If you have a foreign address, see	page 20.	j	You must ente SSN(s) abo	
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Presidential Election Campaign	Note, Checking "Yes" will n	ot change your tax or reduce :	vous refund		You Sp	ouse
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Status Check only	3 Married filing separately	Finter shouse's SSN above a				opondong
one box.	full name here.	Littor spouse s cont above a	∑5 ☐ Qualifying wido	w(er) with d	ependent child (See	page 21.)
Exemptions	6a 🛛 Yourself. If your	parent (or someone else			No. of boxe	5
Examptions		dent on his or her tax re			checked on 6a and 6b	1
	b 🗌 Spouse		· · · · · · · · · · · · · · · · · · ·		No. of child	ren
	c Dependents:	(2) Dependent's socia	(3) Dependent's	(4) √if qua		
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Form 1040	A (200	03)			Page
Taix,	22	Enter the amount from line 21 (adjusted gross income).		22	6,449
credits,	-00			7	
and	238	a Check \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
payment	s ,	(2) Special was both before saidary 2, 1939, [1] billid } checked ▶ 23a	<u> </u>	Ī	
Sandard	〕 :	b If you are married filing separately and your spouse itemizes deductions, see page 32 and check here 23b			ı
Deduction for-	24	Enter your standard deduction (see left margin).	<u> </u>		7,000
People who	25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0		25	0
ch∈cked any box on line	26	Multiply \$3,050 by the total number of exemptions claimed on line 6d.		26	9,150
23a or 23b or	27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-			
who can be claimed as a		This is your taxable income.		27	0
dependent,	28	Tax, including any alternative minimum tax (see page 33).		28	
see page 32. • All others:	29	Credit for child and dependent care expenses. Attach Schedule 2.			
Single or	30	EQ	 	-	
Married filing	30	Credit for the elderly or the disabled. Attach Schedule 3.			
separately, \$4.750	31	Education credits. Attach Form 8863. 31	 	-	
Married filing	32	Retirement savings contributions credit. Attach			
jointly or Qualifying	l	Form 8880. 32			
wiclow(er),	33	Child tax credit (see page 37). 33			
\$9,500 He31 of	34	Adoption credit. Attach Form 8839. 34			
household,	35	Add lines 29 through 34. These are your total credits.		35	
\$7,830	36 37	Subtract line 35 from line 28. If line 35 is more than line 28, enter -0		36	
	38	Advance earned income credit payments from Form(s) W-2. Add lines 36 and 37. This is your total tax.		37	
	39	Federal income tax withheld from Forms W-2	>	38	
	•	and 1099. 39 325			
	40	2003 estimated tax payments and amount			
If you have]	applied from 2002 return. 40 0			
a qualifying child, attach	41_	Earned income credit (EIC). 41 2,570			
Schedule EIC.	42	Additional child tax credit. Attach Form 8812. 42			
	43	Add lines 39 through 42. These are your total payments.	<u> </u>	43	2,895
Refund	44	If line 43 is more than line 38, subtract line 38 from line 43. This is the amount you overpaid .		44	0.005
Direct	45a	Amount of line 44 you want refunded to you.		45a	2,895
deposit?	▶ b	Routing		43 a	2,895
See page 50 and fill in	, ,	number			
45b 45c.	▶ d	Account			
and 45d.		number			
	46	Amount of line 44 you want applied to your			
		2004 estimated tax. 46			
Amount	47	Amount you owe. Subtract line 43 from line 38. For details on how			1
you owe	48	to pay, see page 51. Estimated tax penalty (see page 52). 48	▶ 4	7	
Third		by you want to allow another person to discuss this return with the IRS (see page 52)? Yes you want to allow another person to discuss this return with the IRS (see page 52)?		monlet- the f	Maurina 177 Br
Third party		antonno fo			blowing. No
designee		esignee's James M. Sizemore, Jr. Phone no. > (256) 409-1985 Persona number		fication	
Sign	Uı	nder penalties of periury. I declare that I have examined this return and accompanion school has and about		and to the bes	t of my
here	of	preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.	uring th	ie tax year. Dec	laration
Joint return?	Y C	pur signature Date Your occupation		Daytime pho	ne number
See page 20. Keep a copy	Dif.	ΥΝΔΩ(ά Η Λ(U) V) 5-30.06 Server		(334)514	4-8510
for your) st	pouse's signature. If a joint return, both must sign. Date Spouse's occupation			
records.			ل ٍ		
Paid ,	Pro sig	eparer's make M. Annual Date 5-30-06 Check if self-employed	— 1	Preparer's SSN	or PTIN
preparer's		m's name (or/ Lames M. Sizemore, Ir	<u>للخم</u>	1400006	
use only	yo. ad	urs if self-employed). dress, and ZIP code 792 Commerce Drive, Alexander City, AL 35010 Phone no). /	(256) 409-1	1985
				T	40408 (0000)

42198699602003000000

* (TY2003)

PAGE 0001 OF 6002

. - --

DOCUMENT TYPE: W-2 PAYEE ENTITY DATA: BARBARA A LEWIS

STATE: ** ZIP: 00000-0000

ACCOUNT NUMBER: N/A

PAYER ENTITY DATA: 630654875 RETIREMENT PLAN IND: UDANSWERED

KIDDIE COLLEGE SCHOOLR INC

** 00060

STATUTORY EMPLOYEE IND: NO

TYPE OF EMPLOYMENT: ALL OTHERS MEDCARE WH. ...\$35+ NEDCARE WG. ...\$2,443+

******* *************** TAXPAYER COPY

42196699602003000000

*(TY2003)

PAGE 0002 OF 0002

DOCUMENT TYPE: W-2 PAYEE ENTITY DATA: BARBARA LEWIS

STATE: ** ZIP: 00000-0000

ACCOUNT NUMBER: N/A PAYER ENTITY DATA: CAMELLIA EAPTIST WEM 630918354

RETIREMENT PLAN IND: UNANSWERED

** 00000

STATUTORY EMPLOYES IRD: NO

TYPE OF EMPLOYMENT: ALL OTHERS WAGES.....\$4,006+
FED TX WH.....\$325+
SO SEC WH.....\$248+ SO SEC WAG.....\$4,006+

******* ************ TAXPAYER COPY

SCHEDULE EIC (Form 1040A or 1040)

Earned Income Credit

Qualifying Child Information



OMB No. 1545-0074

Attachment Sequence No. 43 Your social security number

Department of the Treasury in emai Revenue Service

Name(s) shown on return Barbara A. Lewis

Before you begin:

See the instructions for Form 1040A, line 41, or Form 1040, line 63, to make sure that (a) you can take the EIC and (b) you have a qualifying child.



- If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See back of schedule for details.
- It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.
- Be sure the child's name on line 1 and social security number (SSN) on line 2a agree with the child's social security card. Otherwise, at the time we process your return, we may reduce or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.

Ų.	ualifying Child Information		Child 1		Child 2
1	Child's name	First name	Last name	First name	Last name
	If you have more than two qualifying children, you only have to list two to get the maximum credit.	Stamphics	Regions	A S inisten	Region
2	Child's SSN The child must have an SSN as defined on page 43 of the Form 1040A instructions or page 47 of the Form 1040 instructions unless the child was born and died in 2003. If your child was born and died in 2003 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate.	4		<u></u>	-
b	Child's year of birth	Year 1 If born after and 3b; go to	9 9 3 1984, skip lines 3a line 4.	Year 1 If born after and 3b; go t	9 9 7 1984, skip lines 3a o line 4.
	If the child was born before 1985— Was the child under age 24 at the end of 2003 and a student?	Yes. Go to line 4.	No.	Yes.	No. Continue
b	Was the child permanently and totally disabled during any part of 2003?	Yes. Continue	No. The child is not a qualifying child.	Yes. Continue	No. The child is not a qualifying child.
1	Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, foster child, etc.)	daughter		daughter	
5	Number of months child lived with you in the United States during 2003	_			
	• If the child lived with you for more than half of 2003 but less than 7 months, enter "7".		12		12
	If the child was born or died in 2003 and your home was the child's home for the entire time he or she was alive during 2003, enter "12".	Do not enter mo	months ore than 12 months.	Do not enter m	months



claimed as your dependent on line 6c of Form 1040A or Form 1040, and (c) is a U.S. citizen or resident alien. For more details, see the instructions for line 42 of Form 1040A or line 65 of Form 1040.

For Paperwork Reduction Act Notice, see Form 1040A or 1040 instructions.

Cat. No. 13339M

Schedule EIC (Form 1040A or 1040) 2003

Information To Claim Earned Income Credit After Disallowance

OMB No. 1545-0074

► Attach to your tax return.

> See instructions on back.

Attachment Sequence No. 43A

Internal Revenue Service Name(s) shown on return

Your social security number

Ba	rbara A. Lewis		401-00-10000
E≀e		turn instructions or Pub. 596, Earned Income Credit (EIC), fo to make sure you can take the earned income credit (EIC) and	
	√ Do not file this was reduced or	ualifying child, complete Schedule EIC before you fill in this form if you are taking the EIC without a qualifying child and disallowed in the earlier year was because it was determine was not your qualifying child.	the only reason your EIC
₽a	rt I All Filers		
1	Enter the year for which you are filing	ng this form (for example, 2005)	2003
2	reported your earned income or inv Caution. If you checked "Yes," sto	duced or disallowed in the earlier year was because you incomestment income, check "Yes." Otherwise, check "No" p. Do not fill in the rest of this form. But you must attach it	. F Yes V No
2	the EIC. If you checked "No," continued the EIC. If you checked the EI	nue. ointly) be claimed as a qualifying child of another person for	the
	year shown on line 1?	p. You cannot take the EIC. If you checked "No," continue.	. ► Yes ✓ No
ŀε	Till Filers Without a Qualifyir		
4}		ne year shown on line 1 that you lived in the United States .	·
5	If married filing a joint return, enter the lived in the United States	83 (184 if the year on line 1 is 2004), stop. You cannot take the number of days during the year shown on line 1 that your shown on line 1 that your shown on line 1 is 2004), stop. You cannot take the	spouse
Бa	rt III Filers With a Qualifying	<u> </u>	le ElC. See the instructions.
نقار ليو		children you listed as Child 1 and Child 2 on Schedule EIC for the	voor choum on line 1 above
€ a	Enter the number of days each chil	Id lived with you in the United States during the year shown	
		33 for either child (184 if the year on line 1 is 2004), you can r a child who was born or died during the year shown on line	
7	If your child was born or died durin Otherwise, skip this line.	g the year shown on line 1, enter the month and day the ch	nild was born and/or died.
	Child 1 ► (1) Month and day of birth		MM/DD ► LLL/LLL
_	Child 2 ► (1) Month and day of birth		
3		e child lived together during the year shown on line 1. If you live the bull to the addresses where you lived to	ved with the child at more
9	Child 1 ➤ Number and street	ttach a list of the addresses where you lived:	
ű		IP code Prattville, AL 36067	
b	Child 2 ▶ If same as shown for ch	ild 1, check this box. > Otherwise, enter below:	
		IP code	
g		pouse, if filing jointly, and your dependents under age 19) liv the year shown on line 1?.	
		and relationship to the child below. If more than one other p If the year, attach a list of each person's name and relations	
3	Other person living with child 1:	Name	
4.	Other manage that the second second	Relationship to child 1	
Ω	Other person living with child 2:	If same as shown for child 1, check this box. ▶ ☐ Other Name	
		Relationship to child 2	
	Caution. The IRS may ask you to pr	ovide additional information to verify your eligibility to claim	

35010

IRS USE ONLY

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Department of the Treasury
Internal Revenue Service
Exam Operations Stop 4103 AUSC
P.O. Box 2986
Austin, TX 78768-2986

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For assistance, call: 1-866-897-0177

Notice Number: CP75 Date: July 3, 2006

Taxpayer Identification Number:

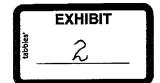
Tax Form: 1040A

Tax Year: December 31, 2003



)01181

BARBARA A LEWIS %JAMES M SIZEMORE JR 792 COMMERCE DR STE 104 ALEXANDER CITY AL 35010-4213



We're Reviewing Your Tax Return And Delaying Part of Your Refund

Why We're Reviewing Your Tax Return

We're reviewing your tax return. This review is why we've delayed sending you the earned income credit (EIC) part of your refund. The information below explains why we're reviewing your return and the information you need to send us so we can make the right decision about your taxes.

EIC Recertification - You must show you qualify for EIC because we denied your EIC during a prior year examination. You need to send us information to show you've met three tests to claim a qualifying child. The enclosed Form 886-H-EIC, Supporting Documents for Taxpayers Claiming EIC, explains the tests.

What You Need To Do Now

To get the EIC you deserve, please send us the above information within 30 days from this letter's date.

You can send us the information by mail, in the enclosed envelope, or by fax to 1-512-460-0146 (not toll-free).

Fill in and send us the stub on the last page of this letter. We'll use the stub to make sure your information gets to the right person and to make sure we can call you if we have any questions.

If you can't get all your information to us in time, call us at the above number to discuss what you can do.

What We'll Do Once We Hear from You

We'll review the information you send us. If your information shows your return was correct, we won't make any changes to your tax return and we'll send you the EIC part of your refund. You won't need to do anything else.

If your information doesn't show your return was correct, we'll send you a report of changes we plan to make to your tax return and explain the tax you will owe. We'll also explain your right to appeal if you disagree.

Please allow us at least 30 days to review your information. After our review, we'll let you know by letter what we're going to do and explain your appeal rights, if we propose changes.

Any EIC refund you claimed will be delayed while we review your information.

What Happens If You Don't Reply

If we don't hear from you within 30 days, you will not receive the EIC part of your refund. We'll send you a letter and a report disallowing the tax return items we've questioned. We'll explain how you can appeal if you disagree.

Supporting Documents for Taxpayers Claiming EIC on the Basis of a Qualifying Child(ren)

For Tax Year 2003, to be your qualifying chiid, the chiid must meet the following three tests: Relationship, Age, and Residency. If you don't have a chiid who meets the test for a qualifying chiid, you may still qualify for a reduced Earned Income Credit (see reverse side).

You do not need to claim head of household filing status or a dependent to qualify for the earned income credit.

		AGE TE		のは、日本の					ES		15/15/10 (15/15/15/15/15/15/15/15/15/15/15/15/15/1
影響語數學學的 the child Iss語語過程的表 解析 Related to you as described in the Relationship Test. (5)	Permanently and totally disabled at any time during tax year 2003	Under age 24 at the end of tax year 2003		some the facilities are considered (SSL PHILO), PAULT FOR PROPERTY of the search of th	Eligible foster child (placed with you by an authorized placement agency)	Brother, sister, stepbrother or stepsister or a descendant of any of them (such as a niece or nephew)	Child pending adoption	Stepson, stepdaughter, or a descendent of your stepson or stepdaughter	Grandchild or great grandchild	Son or daughter (including an adopted child)	
加温膨胀膨胀的 And: 测光细膨胀肌 The child lived with you in the United States for more than half of the year 2003	Any age	Child was a full-time student for at least 5 months of the tax year		**Additional Requirement:	You cared for that child as you would your own	You cared for that child as you would your own	None	None	None	None	Additional Requirement
in 形形的 Sent photocopies at documents for the tax year 2003:11 原形的 To show that the child lived with you for more than half of 2003 send: One of the following: school records, medical records, dayoare records, or social services records that show names, common address and dates	Letter from child's doctor, other healthcare provider, or any other social service program or agency verifying the child is permanently and totally disabled	Official school records showing that the child was a full-time student for at least 5 months of the tax year and the dates of attendance. The months need not be consecutive.	IRS will confirm. Send nothing at this time. You may be asked for additional information at a later date. GO TO RESIDENCY TEST.	English Then send photocopies of documents for the tax year 2003 : insurantican	Letter from the authorized placement agency or applicable court documents	Birth certificates that verify your relationship to the child If a step retationship also provide magriage certificates	Letter from an authorized adoption agency	Birth certificates and marriage certificates that verify your relationship to the child	Birth certificates that verify your relationship to the child	None IRS will confirm the relationship. Send nothing at this time, however, you may be asked for additional information at a later date. GO TO AGE TEST.	Management Transport

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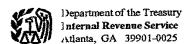
35010

IRS USE ONLY

07209-154-83206-6

4 0

200626 CP:



For assistance, call: 1-800-829-0922

Notice Number: CP49 Date: July 10, 2006

Taxpayer Identification Number:

Tax Form: 1040A

Tax Year: December 31, 2003

EXHIBIT

Separate

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210401.255424.0775.019 1 AT 0.308 630

BARBARA A LEWIS %JAMES M SIZEMORE JR 792 COMMERCE DR STE 104 ALEXANDER CITY AL 35010-4213

310401

Overpaid Tax Applied to Other Taxes You Owe

We applied \$325.00 of the overpaid tax on your 2003 tax return to the unpaid balance of other federal taxes which our records show you owe.

You may still be due a refund if we applied only part of your overpayment to other taxes. You also may be due a refund if you recently made a payment against the other taxes that we had not credited when we applied your overpayment. In either case, you will receive a check for any refund due you as long as the a nount is greater than one dollar. You must request a refund of less than one dollar. If you have any questions, please call us at the number listed above.

The figures below show our calculation:

How We Applied Your Overpayment

Amount of Overpaid Tax on Your Return	\$2,895.00
Amount of Interest You Earned on Overpayment	\$.00
Total Amount Due You	\$2,895.00
Total Amount Applied	\$325.00
Amount You Will Receive as a Refund (any interest due you will be added)	\$2,570.00

Where We Applied Your Overpayment

Form(s)	Tax Period(s)	Amount(s) Applied	Balance Remaining
1.040	Dec. 31, 1995	\$325.00	\$6,606.53

The following information may pertain to you if you are currently married or were previously married. Did we use your refund to pay for income taxes that you and a former (or current) spouse owe? If you file a claim, you may be eligible to receive relief from having to pay your former (or current) spouse's income tax debt. A successful claim for relief could change the tax you have to pay. You may not owe anything at all. You could receive your refund or other payments back.

City State Zip Ref. SS # State State Sinth Place Alight Certificate SS # State State Sinth Place Alight Continues GRADES 1-8 GRADES 1-7 GRADES 1-8 GRADES 1-8 GRADES 1-7 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-7 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-7 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-8 GRADES 1-8 GRADES 1-8 GRADES 1-7 GRADES 1-7 GRADES 1-8 GRADES 1-7 GRADES 1-	्र हि क्रिक्रक्रक्रक्रक्रक्रक्रक्रक्रक्रक्रक्रक्रक	TO T		ATTENS OF THE PRIVATE
Occupation 1911/1/2 Business Phone 365-2919 Occupation 1911/1/2 Business Phone 365-2919 Occupation Business Phone 361-979 Address Home Phone 361-771.35	Occur Occur Occur Addre	Relationship	Trans	Mother SALD A Buardien Student lives with A Date Entered

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-				A A M A A A A A A A A A A A A A A A A A	1.		TEACHER	5	NAME ALL DESCRIPTION OF STREET	DATE WITHDAWN	DAYS ABSENT	DAYS PRESENT	-	S.O Tdy: 15		Nancy 73		Payton, Nancy 65 D	o g	88	Payton, Nancy S S		AVG. SUBJECT AVG.	20 20	Grade			1.0	Prattville lindera show	. Records Sent To	Transferred From	- Relationship		XX	15/VII 2	りいでし
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EXHIBIT

Department of the Treasury Internal Revenue Service

PO BOX 2986 STOP 4103 AUSC AUSTIN TX 78767

BARBARA A LEWIS
PRATTVILLE AL 36067-3941

Letter Date:

August 25, 2006

Taxpayer Identification Number:

Tax Year Ended:

December 31, 2003 Person to Contact:

Homer Marshall

PC 0694

EGC

5111

Contact Identification Number:

18-02613

Contact Telephone Number:

1/877-834-6302 ex 7385

Contact Fax Number:

512-460-0146

Contact Hours:

6:30 AM 2:30 PM

Dear Taxpayer:

Thank you for your response dated July 21, 2006 about your 2003 income tax return.

Based upon the information you have provided and our review of your return, we have prepared a Proposed Report of Adjustment that shows the amount of the adjustments that we propose to make on items on your return. The report also shows the amounts of your tax liability and the amount of tax that is still due from you or to be refunded to you if you agree with the proposed adjustments.

The tax technician above is the contact person for your examination. Please send all information and documents to the person to contact at the above address. Whenever you write to us, please remember to include your area code and telephone number, along with a copy of this letter. You may want to make a copy of this letter and any information you send us for your records.

If you agree with the proposed changes, please sign, date, and return the report, which shows a refund of \$.00. We will send the refund to you if you owe no other taxes and have no other legal obligations that we are required to collect. We will mail the refund within eight weeks after we receive the signed report.

If you do not agree with any of the proposed adjustments, please send us additional information about the items on which you disagree. It is important that you mail your response, including any supporting information, to the above address within 15 days.

If you disagree with our findings after we have reviewed your information, you may appeal the proposed charges with the Appeals Office, as set forth in the enclosed Publication 3498-A, *The Examination Process* (Exemination by Mail).

(continued next page)

Letter 692(SC/CG) (Rev. 2-2005) Catalog Number 27194T

THE RESERVE TO					,	
Form 4	1549 larch 2005)	Department of the Treasury-Intern Income Tax Examina			Page	1 of 2
` -	nd Address of Tax	·	Taxpayer Identification	n Number	Retun	Form No.:
TVOITE IN	io / maiocoo or Ton	,				1040A
	RA A LEWIS	6067-3941	Person with whom examination changes were discussed.	Name and T	itle:	
1. Acju	stments to inco	me	Period End 12/31/2003	Period I	nd	Period End
a.						
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	rected Taxable II		(9,701.00)			
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	Filing Stat	us	Head of Household			
5. Tax			0.00			
6. Addi	tional Taxes / Alt	ernative Minimum Tax				
	ected Tax Liabilit	у	0.00	<u> </u>		
8. Less						
Case						
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0 Pal-	d.	Lines 8a through 8d)	0.00	<u> </u>		
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10. Pius	1.					1
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		iability (Line 9 plus Lines 10a through 10d)	0.00	1		
		Return or as Previously Adjusted	0.00			
13. Adju	stments to: a.	armed Income Credit	(2,570.00)			
	D. 15	arned Income Credit	(2,5/0.00)			
44 Del		Tay or (Overnooppement Decrees in Tay)		1		
		n Tax or (Overassessment-Decrease in Tax) adjusted by Lines 13a plus 13b)	2,570.00	1		
		yment Credits - Increase (Decrease)	2,570.00	1		
		erpayment) - (Line 14 adjusted by Line 15)	_,			-
	ludina interest an		0.00			ļ

The Internal Revenue Service has agreements with state tax agencies under which information about federal tax, including increases or decreases, is exchanged with the states. If this change affects the amount of your state income tax, you should amend your state return by filing the necessary forms.

You may be subject to backup withholding if you underreport your interest, dividend, or patronage dividend income you earned and do not pay the required tax. The IRS may order backup withholding (withholding of a percentage of your dividend and/or interest income) if the tax remains unpaid after it has been assessed and four notices have been issued to you over a 120-day period.

Form 4549 (Rev. 3-2005) Catalog Number 23105A www.irs.gov

Name of Taxpayer: dentification Number:



Total

08/17/2006 7.20.00

2003 - Taxable Earned Income Worksheet for Child Tax Credit/8812

1. Enter the amount from Form 1040, line 7	1.	6.449.00
Next, if you are filing Schedule C, C-EZ, F, or SE, or you received a Schedule K-1 (Form 1065)	or Form	
1065-B), go to line 2a. Otherwise, skip lines 2a through 2e and go to line 3.		
2. a. Enter any statutory employee income reported on line 1 of Schedule C or C-EZ	2a.	0.00
b. Enter any statutory employee measure reported on a 1; Schedule C-EZ, line 3; Schedule K-1 (Fo	nm 1065),	
line 15a (other than farming); and Schedule K-1 (Form 1065-B), box 9. Reduce this amount by	any	
unreimbursed nonfarm partnership expenses you deducted on Schedule E. Do not include any	statutory	
employee income or any other amounts exempt from self-employment tax. Options and commo	odities	
dealers must add any gain or subtract any loss (in the normal course of dealing in or trading se	ction 1256	
contracts) from section 1256 contracts or related property	2b.	0.00
c. Enter any net farm profit or (loss) from Schedule F, line 36, and from farm partnerships,		
Schedule K-1 (Form 1065), line 15a. Reduce this amount by any unreimbursed		
farm partnership expenses you deducted on Schedule E. Do not include any amounts		
exempt from self-employment tax	0.00	
d. If you used the farm optional method to figure net earnings from self-employment, enter		
the amount from Schedule SE, Section B, line 15. Otherwise, skip this line and enter		
on line 2e the amount from line 2c		
e. If line 2c is a profit, enter the smaller of line 2c or line 2d. If line 2c is a (loss), enter the (loss) if	from line 2c. 2e.	0.00
 Time 2c is a profit, enter the strainer of the 2c of this 2c. if the 2c of the 2c. if the 2c of the 2c. if the 2c of this 2c. if the 2c of this 2c. if the 2c of the 2c. if the 2	d enter	
-0- on line 2 of the Line 13 Worksheet on page 6 or line 4 of Form 8812, whichever applies	3.	6.449.00
-U- on line 2 of the Line is worksheet on page 6 of the 4 of 1 of 1 of 1.		
4. Enter any amount included on line 1 that is:	0.00	
a. A scholarship or fellowship grant not reported on Form W-2	****	
b. For work done while an inmate in a penal institution (enter "PRI" and this amount	0.00	
on the dotted line next to line 7 of Form 1040)	••••	
c. A pension or annuity from a nonqualified deferred compensation plan or a		
nongovernmental section 457 plan (enter "DFC" and this amount on the dotted line		
next to line 7 of Form 1040). This amount may be shown in box 11 of your Form W-2.		
If you received such an amount but box 11 is blank, contact your employer for the	0.00	
SIMOUNT received as a perision of armony.	0.00	
5. a. Enter any amount included on line 3 that is also included on Form		
2555, line 41, or Form 2555-EZ, line 18. Do not include any		
CHRICITE STATE TO GROW WIND THE		
b. Enter the amount, if any, from Form 2555, line 42, that is		
also deducted on Schedule C, C-EZ, or F, or included on		
20080016 C It harries sub ner monte or frost	0.00	
c. Subtract line 5b from line 5a	0.00	
6. Enter the amount from Form 1040, line 28		0.00
7. Add lines 4a through 4c, 5c, and 6		6.449.00
8. Subtract line 7 from line 3		0.447.00
the state of the s	of that	

- If you were sent here from the Line 13 Worksheet on page 6, enter this amount on line 2 of that
- If you were sent here from Form 8812, enter this amount on line 4 of that form.

Form 886-A (Rev. January 1904)886-A	EXPLANA	TION OF ITEMS	Schedule number or exhibit
Name of Taxpayer	Ta	xpayer Identification Number	Year/Period Ended
BARBARA A LEWIS	·		2003

Earned Income Credit

Tax Period 2003 Per Return \$2,570.00 Per Exam \$0.00 Adjustment (\$2,570.00)

Your qualifying child is on another taxpayer tax return. If you and someone else have the same qualifying child, or ly the person with the higher adjusted gross income may be able to claim the credit.

Since you did not establish that you were entitled to the earned income credit, we disallowed it.

Frozen Refund

Tax Period 2003 Per Return (\$2,570.00)

Per Exam \$0.00 Adjustment \$2,570.00

A portion or all of your overpayment is being withheld pending the outcome of this examination. If at the conclusion of the examination a deficiency is determined the overpayment will be applied to the tax deficiency. If the overpayment is less than the deficiency, you will be sent a separate bill for any additional amount of tax owed. You may owe interest and/or penalties on the total amount of the tax deficiency. If there is any remaining overpayment it will be refunded if there are no other taxes that we are required to collect or other obligations oved. In order for your account to be properly adjusted, please sign and return the enclosed proposal.

Case	2:07-cv-00018-MHT-SRW	_Document 13-5 _	Filed 04/11/2007	Page 5 of 5
Form 886-A	Ехр	lanation of Items	3	

lame of Taxpayer:	SSN:	Tax Year Ended:
BARBARA A LEWIS		December 31, 2005

We have considered your July 21,2006 reply. The documentation you provided does not verify that you neet the requirements for the earned income credit as shown on your return. Please read the explanation selow concerning the items we have disallowed.

Earned Income Credit

The earned income credit is based on three tests: relationship, residency, and age for the qualifying person.

Residency Test

Since we cannot determine that the children lived with you for the required period of time for the tax year in question, we have disallowed the earned income credit.

\ge Test

The age test has been met.

Sometimes a child meets the rules to be a qualifying child of more than one person. If you and someone also have the same qualifying child, only the person with the higher adjusted gross income may be able to taken the credit.

We are disallowing your earned income credit.

f you would like us to reconsider these proposed adjustments, please provide the information requested on he attached Form 886-A.

f you agree with the proposed changes, please sign, date and return the report.

FC:RM 5564(Rev. June 1992)	Department of the Treasury — Internal Revenue Serv NOTICE OF DEFICIENCY - WAIVI	A
Name and Address of Taxpaye	r(s) S	September 15, 2006
BARBARA A LEW %JAMES M SIZE 792 COMMERCE ALEXANDER CIT	MORE JR	
Kind of Tax INDIVIDUAL INCOME	X Copy to Authorized Representative JAMES M SIZEMORE JR	
Tax Year Ended	DEFICIENCY	
DECEMBER 31, 2003	Increase in Tax \$2,570.00	Penalties

EXHIBIT

THE AMOUNT SHOWN AS DEFICIENCY MAY NOT BE BILLED YOU, SINCE ALL OR A PORTION OF THE REFUND DUE YOU HAS BEEN HELD TO OFFSET ALL OR A PORTION OF THE AMOUNT OF THE DEFICIENCY. THE AMOUNT THAT WILL BE BILLED YOU, IF ANY, IS SHOWN ON THE ATTACHED EXAMINATION REPORT.

I consent to the immediate assessment and collection of the deficiencies (increase in tax and penalties) shown above, plus any interest. Also, I waive the requirement under section 6532 (a) (1) of the Internal Revenue Code that a rotice of claim disallowance be sent to me by certified mail for any overpayment shown on the attached report.

I understand that the filing of this waiver is irrevocable and it will begin the 2-year period for filing suit for refund of the claims disallowed as if the notice of disallowance had been sent by certified or registered mail.

Ó			Date
natuı	, , , ,		Date
Sign	Ву	Title	Date

Note: If you consent to the assessment of the deficiencies shown in this waiver, please sign and return this form to limit the interest charge and expedite our bill to you. Please do not sign and return any prior notices you may have received. Your consent signature is required on this waiver, even if fully paid.

Your consent will not prevent you from filing a claim for refund (after you have paid the tax) if you later believe you are so entitled; nor prevent us from later cletermining, if necessary, that you owe additional tax; for extend the time provided by law for such action.

If you later file a claim and the Service disallows it, you may file suit for refund in a District Court or in the United States Claims Court, but you may not file a petition with the United States Tax Court.

Who Must Sign: If you filed jointly, both you and your spouse must sign. Your attorney or agent may sign this waiver provided that action is specifically authorized by a power of attorney which, if not previously filed, must accompany this form.

If this waiver is signed by a person acting in a fiduciary capacity (for example, an executor, administrator, or a trustee), Form 56, Notice Concerning Fiduciary Relationship, should, unless previously filed, accompany this form.

If you agree, please sign and return this form; keep one copy for your records.

FORM 5564(Rev. 6-92)

orm 4.549 Rev. March 2005)	Department of the Treasury-Internal Re Income Tax Examinatio	n Changes		Page_	2_of2
Name of Taxpayer	Taxpayer Identification Number		Return Form No.: 1040A		
7. Penalties/ Code Secti	ons	Period End 12/31/2003	Period E	nd	Period End
3.				l	
J.				[
 L					
r i	·			1	
2.				ł	
•• •				I	
].				1	
).				1	
				1	
<u>.</u>				1	
-				1	
n.	;				
··· D.					
18. Total Penalties					
A lax addition of 50 pe	able to negligence: (1981-1987) ercent of the interest due on the crue until it is paid or assessed.				
A tex addition of 50 pe	able to fraud: (1981-1987) ercent of the interest due on the crue until it is paid or assessed.				
The interest will accru	able to Tax Motivated Transactions (TMT). Le and be assessed at 120% of the under- dance with IRC §6621(c)	0.00			
19. Summary of Taxes,	Penalties and Interest:				
a. Balance due or (Over	payment) Taxes - (Line 16, Page 1)	0.00			
b. Per:alties (Line 18) -	computed to 08/27/2006				
c. Interest (IRC § 6601)	- computed to 09/26/2006	0.00			•
d. TMT Interest - compu	ited to 09/26/2006 (on TMT underpayment)	0.00			
e. Amount due or (refun	d) - (sum of Lines a, b, c and d)	0.00			L

Other information:

Examiner's Signature:	Employee ID:	Office:	Date:
Home: Marshall	18-02613	CSB	08/27/2006

Consent to Assessment and Collection-1 do not wish to exercise my appeal rights with the Internal Revenue Service or to contest in the United States Tax Court the findings in this report. Therefore, I give my consent to the immediate assessment and collection of any increase in tax and penalties, and accept any decrease in tax and penalties shown above, plus additional interest as provided by law. It is understood that this report is subject to acceptance by the Area Director, Area Manager, Specialty Tax Program Chief, or Director of Field Operations.

PLEASE NOT		as filed. ВОТН laxpayers must sign	
Signature of Taxpayer .	Date:	Signature of Taxpayer	Date:
Ву:		Title:	Date:

Catalog Number 23105A

www.irs.gov

Form 4549 (Rev. 3-2005)

Form 45		Department of the Treasury-Interna Income Tax Examinat	l Revenue Service ion Changes		Page.	1 of 2
	Address of Ta	<u> </u>	Taxpayer Identification	n Number	Return	Form No.: 1040A
BARBARA PRAT:"/II		36067-3941	Person with whom examination changes were discussed.	Name and 1	fitle:	
1 Adjustr	ments to inc	ome	Period End	Period	End	Period End
			12/31/2003			
a. b						
b. c.						
d.						
e.						
f.						
g.					;	
h.						
i.		•				
j.						
k.				ł		
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n.						
O.						
<u>р.</u>			0.00			
	djustments	Dahum ar an Brasinschi Adiustad	(9,701.00)	ł		
		Return or as Previously Adjusted	(9,701.00)			
4. Correc	ted Taxable Tax Met		TAX TABLE			
	Filing St		Head of Household			
5. Tax			0.00	· [
6. Accito	nal Taxes / A	Iternative Minimum Tax				
7. Correct	led Tax Liabi	ity	0.00	<u> </u>		
8. Less	a.					
Credits		,				
	C. đ.					
9 Ralano		s Lines 8a through 8d)	0.00			
	a.					
10. Plus Other	b.					
Taxes	C.		1	1		
	d.					
11. Total C	Corrected Tay	Liability (Line 9 plus Lines 10a through 10d)	0.00	, [
12. Total T	ax Shown or	Return or as Previously Adjusted	0.00)		
	ments to: a.	• • •				
		Earned Income Credit	(2,570.00)	1		
	c.			_		
14. Deficie	ncy-Increase	in Tax or (Overassessment-Decrease in Tax)		,		
		2 adjusted by Lines 13a plus 13b)	2,570.00	1		
		payment Credits - Increase (Decrease)	2,570.00	<u> </u>		
16. Balanc	ce Due or (O	verpayment) - (Line 14 adjusted by Line 15)	0.00			

The Internal Revenue Service has agreements with state tax agencies under which information about federal tax, including increases or decreases, is exchanged with the states. If this change affects the amount of your state income tax, you should amend your state return by filing the necessary forms.

You may be subject to backup withholding if you underreport your interest, dividend, or patronage dividend income you earned and do not pay the required tax. The IRS may order backup withholding (withholding of a percentage of your dividend and/or interest income) if the tax remains unpaid after it has been assessed and four notices have been issued to you over a 120-day period.

Form 4549 (Rev. 3-2005) www.irs.gov Catalog Number 23105A

Form 886-A (Rev. January 1994)886-A	EXPLANATION OF ITEMS	Schedule number or exhibit
Name of Taxpayer	Taxpayer Identification Number	Year/Period Ended
BARBARA A LEWIS		2003

Earned Income Credit

Tax Period 2003

Per Return \$2,570.00 Per Exam \$0.00

Adjustment (\$2,570.00)

Your qualifying child is on another taxpayer tax return. If you and someone else have the same qualifying child, only the person with the higher adjusted gross income may be able to claim the credit.

Since you did not establish that you were entitled to the earned income credit, we disallowed it.

Frozen Refund

Tax Period

Per Return

Per Exam

Adjustment \$2,570.00

(\$2,570.00) 2003 \$0.00

A portion or all of your overpayment is being withheld pending the outcome of this examination. If at the conclusion of the examination a deficiency is determined the overpayment will be applied to the tax deficiency. If the overpayment is less than the deficiency, you will be sent a separate bill for any additional amount of tax owed. You may owe interest and/or penalties on the total amount of the tax deficiency. If there is any remaining overpayment it will be refunded if there are no other taxes that we are required to collect or other obligations owed. In order for your account to be properly adjusted, please sign and return the enclosed proposal.

Name of Taxpayer: Identification Number:

BARBARA A LEWIS

Total

08/27/2006 7.20.00

2003 - Taxable Earned Income Worksheet for Child Tax Credit/8812

1.	. Enter the amount from Form 1040, line 7	1	6.449.00
	Next if you are filing Schedule C, C-EZ, F, or SE, or you received a Schedule K-1 (Form 1065 or Form		0.71700
_	1065-B), go to line 2a. Otherwise, skip lines 2a through 2e and go to line 3.	_	0.00
Z.	a. Enter any statutory employee income reported on line 1 of Schedule C or C-EZ	2a.	0.00
	 Enter any net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), line 15a (other than farming); and Schedule K-1 (Form 1065-B), box 9, Reduce this amount by any 		
	unreimbursed nonfarm partnership expenses you deducted on Schedule E. Do not include any statutory		
	employee income or any other amounts exempt from self-employment tax. Options and commodities		
	dealers must add any gain or subtract any loss (in the normal course of dealing in or trading section 1256		
	contracts) from section 1256 contracts or related property	2h	0.00
	Enter any net farm profit or (loss) from Schedule F, line 36, and from farm partnerships.	. 20.	
	Schedule K-1 (Form 1065), line 15a. Reduce this amount by any unreimbursed		
	farm partnership expenses you deducted on Schedule E. Do not include any amounts		
	exempt from self-employment tax)	
	d. If you used the farm optional method to figure net earnings from self-employment, enter		
	the amount from Schedule SE, Section B, line 15. Otherwise, skip this line and enter		
	on line 2e the amount from line 2c		
	a. If line 2c is a profit, enter the smaller of line 2c or line 2d. If line 2c is a (loss), enter the (loss) from line 2c	. 2e.	0.00
3	Add lines 1, 2a, 2b, and 2e. If zero or less, stop. Do not complete the rest of this worksheet. Instead, enter		
	-0- on line 2 of the Line 13 Worksheet on page 6 or line 4 of Form 8812, whichever applies	3.	6.449.00
4	Enter any amount included on line 1 that is:		
	a. A scholarship or fellowship grant not reported on Form W-24a. 0.0	0	
	 For work done while an inmate in a penal institution (enter *PRt* and this amount 		
	on the dotted line next to line 7 of Form 1040)	0	
	c. A pension or annuity from a nonqualified deferred compensation plan or a		
	nongovernmental section 457 plan (enter *DFC* and this amount on the dotted line		
	next to line 7 of Form 1040). This amount may be shown in box 11 of your Form W-2.		
	If you received such an amount but box 11 is blank, contact your employer for the		
	amount received as a pension or annuity. 4c. 0.0	0	
5.	a. Enter any amount included on line 3 that is also included on Form		
	2555, line 41, or Form 2555-EZ, line 18. Do not include any		
	amount that is also included on line 4a, 4b, or 4c above 5a. 0.00		
	b. Enter the amount, if any, from Form 2555, line 42, that is		
	also deducted on Schedule C, C-EZ, or F, or included on Schedule E in partnership net income or (loss)		
	c. Subtract line 5b from line 5a	M	
ء			
	Enter the amount from Form 1040, line 28	-	0.00
	Add lines 4a inrough 4c, 5c, and 6 Subtract line 7 from line 3		
o.		. 6.	6.449.00
	 If you were sent here from the Line 13 Worksheet on page 6, enter this amount on line 2 of that 		

- eet on page 6, enter this amount on line 2 of that worksheet.
- If you were sent here from Form 8812, enter this amount on line 4 of that form.

IRS Department of the Treasury Internal Revenue Service Austin, TX 73301-0040

BARBARA A LEWIS

%JAMES M SIZEMORE JR

792 COMMERCE DR STE 104

ALEXANDER CITY, AL 35010-4213524



7183 6247 9815 2088 9356

EXM00

WI

Letter Number: 3219(SC/CG) Letter Date: September 15, 2006

Taxpayer Identification Number:

Tax Form: 1840

Tax Year Ended and Deficiency

DECEMBER 31, 2003 \$2,570.00

Contact Person:

CORRESPONDENCE EXAM TECHNICIAN

Contact Telephone Number: 1 866-897-0177 (TOLL FREE NUMBER)

Hours to Call:

8:00 AM TO 8:00 PM M - F

Last Date to Petition Tax Court: December 14, 2006

Penalties/Additions to Tax

Dear Taxpayer:

We have determined that there is a deficiency (increase) in your income tax as shown above. This letter is your NOTICE OF DEFICIENCY, as required by law. The enclosed statement shows how we figured the deficiency.

If you want to contest this determination in court before making any payment, you have until the <u>Last Date to Petition Tax Court</u> (90 days from the date of this letter or 150 days if the letter is addressed to you outside the United States) to file a petition with the United States Tax Court for a redetermination of the amount of your tax. You can get a petition form and the rules for filing a petition from the Tax Court. You should file the petition with the **United States Tax Court**, 40) Second Street NW, Washington D.C. 20217. Attach a copy of this letter to the petition.

The time in which you must file a petition with the court (90 days or 150 days as the case may be) is fixed by law and the Court cannot consider your case if the petition is filed late. As required by law, separate notices are sent to spouses. If this letter is addressed to both a husband and wife, and both want to petition the Tax Court, both must sign the petition or each must file a separate, signed petition.

The Tax Court has a simplified procedure for small tax cases when the amount in dispute is \$50,000 or less for any one tax year. You can also get information about this procedure, as well as a petition form you can use, by writing to the Clerk of the United States Tax Court at 400 Second Street, NW, Washington, D.C. 20217. You should write promptly if you intend to file a petition with the Tax Court.

If you decide *not* to file a petition with the Tax Court, please sign and return the enclosed waiver form to us. This will permit us to assess the deficiency quickly and will limit the accumulation of interest. We've enclosed an envelope you can use. If you decide not to sign and return the waiver and you do not petition the Tax Court, the law requires us to assess and bill you for the deficiency after 90 days from the date of this letter (150 days if this letter is addressed to you outside the United States).

If you have questions about this letter, you may call the Contact Person whose name and telephone number are shown in the heading of this letter. If this number is outside your local calling area, there will be a long distance charge to you. If you prefer, you can call the Internal Revenue Service (IRS) telephone number in your local directory. An IRS employee there may be able to help you, but the office at the address shown on this letter is most familiar with your case.

When you send information we requested or if you write to us about this letter, please provide a telephone number and the best time to call you if we need more information. Please attach this letter to your correspondence to help us identify your case. Keep the copy for your records.

The person whose name and telephone number are shown in the heading of this letter can access your tax information and help get you answers. You also have the right to contact the Taxpayer Advocate. You can call 1-877-777-4778 and ask for Taxpayer Advocate Assistance. Or you can contact the Taxpayer Advocate for the IRS Office that issued this Notice of Deficiency by calling 1-512-460-8300 or writing to:

AUSTIN SERVICE CENTER TAXPAYER ADVOCATE P.O. BOX 934, STOP 1005-AUSC AUSTIN, TX 78767

Taxpayer Advocate assistance is not a substitute for established IRS procedures such as the formal appeals process. The Taxpayer Advocate is not able to reverse legally correct tax determinations, nor extend the time fixed by law that you have to file a petition in the United States Tax Court. The Taxpayer Advocate can, however, see that a tax matter that may not have been resolved through normal channels gets prompt and proper handling.

Thank you for your cooperation.

Sincerely yours,

Commissioner By

> R. Auby COMPLIANCE CENTER Austin Service Center

Enclosures: Copy of this letter Waiver Envelope

REVERSE 5

UNITED STATES DISTRICT COURT MIDDLE DISTRICT OF ALABAMA NORTHERN DIVISION

Barbara S. LEWIS)	
)	
Plaintiff)	
)	
v.)	Case No. 2:07-cv-18 MHT
)	
UNITED STATES of America)	Demand for Jury Trial
)	
Defendant)	

AFFIDAVIT

Comes now James M. Sizemore, Jr., who is known to me and who, being first duly sworn, deposes and says:

- 1. My name is James M. Sizemore, Jr., and I am over 19 years of age and qualified to testify in court to the matters stated herein.
- 2. I make this affidavit in support of a Motion for Summary Judgment that I filed on behalf of the Plaintiff Barbara Lewis.
- 3. I examined her tax return for 2003 for the purpose of determining the accuracy of the calculations by which she sought an earned income tax credit in the amount of \$2,570.
- 4. Based upon the IRS instructions for tax year 2003, and using the EIC credit table, Ms. Lewis' earned income credit is properly calculated as being

\$2,570 based on earnings of \$6,449 and assuming that she qualifies for earned income credit with two qualifying children. I attach a copy of the IRS EIC table contained on pages 51 and 52 of its instructions.

STATE OF ALABAMA TALLAPOOSA COUNTY

Before me, the undersigned notary public, personally appeared James M. Sizemore, Jr., who is known to me, and who, being first duly sworn, deposes and says that the facts contained in the foregoing affidavit are true and correct.

DONE this 10 day of April, 2007.

My commission expires:

2003 Earned Income Credit (EIC) Table

Caution. This is not a tax table.

1. To find your credit, read down the "At least - But less than" columns and find the ine that includes the amount you were told to look up from credit from that column on our EIC Worksheet.

2. Then, go to the column children you have. Enter the your EIC Worksheet.

Example. If your filing that includes your filing status status is single, you have one and the number of qualifying qualifying child, and the amount you are looking up from your EIC Worksheet is \$2,455, you would enter \$842.

And your filing status is-If the amount you are Single, head of household, looking up from the worksheet isor qualifying widow(er) and you have-No One Two bildren child children At least But less-than Your credit is-2,490 2,450 186 <u>825</u> 970 2,450 2,500 189 842 990

7001 110	TTUINGINGE.		you c	IC VYUINS	ieet.		WOULG GI	itei \$042.									
	1		and your fill	ng statu	19 is				1	Aı	nd your fill	ng statu	s is				
if the amount you are looking up from the worksheet is—		Single	Single, head of household, Married filing jointly and						ount you are	Sinoto	, head of h	ouechold	Married filing jointly and				
					you have—				up from the								
			or qualifying widow(er) and			you have—			et is—	or qualifying widow(er) and			you have -				
WOIRSHO	WOI KSHOOL IS—		you have			No. 3 Co. 1 To.			er 19—	you have—							
		No childre	One		No	One	Two			No	One	Two	No One Two				
			en child	children	childre	n child	children			childre	n child	children	childre		children		
At least	But less than	1`	Your cred	it is	Y	our credi	t Is—	At least	But less than	1	Your cred	it is—	1	Cour cred	it is—		
\$1	\$50	\$2	\$9	\$10	\$2	\$9	\$10	3,000	3,050	231	1,029	1,210	231	1,029	1,210		
50	100	. 6			6	26	30	3,050	3,100	235	1,046		235	1,046			
100	150	10			10	43	50	3,100	3,150	239	1,063	1,250	239	1,063			
150	200	13		70	13	60	70			243							
200	250	17		90				3,150	3,200		1,080	1,270	243	1,080			
					17	77	90	3,200	3,250	247	1,097	1,290	247	1,097			
250	300	21	94	110	21	94	110	3,250	3,300	251	1,114	1,310	251	1,114			
300	350	25		130	25	117	130	3,300	3,350	254	1,131	1,330	254	1,131	1,330		
350	400	29	128	150	29	128	150	3,350	3,400	258	1,148	1,350	258	1,148	1,350		
4 0 0	450	33	145	170	33	145	170	3,400	3,450	262	1,165	1,370	262	1,165	1,370		
450	500	36	162	190	36	162	190	3,450	3,500	266	1,182	1,390	266	1,182			
500	550	40	179	210	40	179	210	3,500	3,550	270	1,199	1,410	270	1,199			
550	600	44	196	230	44	196	230	3,550	3,600	273	1,216	1,430	273	1,216			
600	650	48	213	250	48	213	250	3,600	3,650	277		1,450	277				
650	700										1,233			1,233			
		52	230	270	52	230	270	3,650	3,700	281	1,250	1,470	281	1,250			
700	750	<u>55</u>	247	290	55	247	290	3,700	3,750	285	1,267	1,490	285	1,267	1,490		
750	800	59	264	310	59	264	310	3,750	3,800	289	1,284	1,510	289	1,284	1,510		
800	850	63	281	330	63	281	330	3,800	3,850	293	1,301	1,530	293	1,301	1,530		
850	900	67	298	350	67	298	350	3,850	3,900	296	1,318	1,550	296	1,318	1,550		
900	950	71	315	370	71	315	370	3,900	3,950	300	1,335	1,570	300	1,335	1,570		
950	1,000	75	332	390	75	332	390	3,950	4,000	304	1,352	1,590	304	1,352	1,590		
1,000	1,050	78	349	410	78	349	410	4,000	4,050	308	1,369	1,610	308	1,369	1,610		
1,050	1,100	82	366	430	82	366	430	4,050	4,100	312	1,386	1,630	312	1,386	1,630		
1,100	1,150	86	383	450	86	383											
							450	4,100	4,150	316	1,403	1,650	316	1,403	1,650		
1,150	1,200	90	400	470	90	400	470	4,150	4,200	319	1,420	1,670	319	1,420	1,670		
1,200	1,250	94	417	490	94	417	490	4,200	4,250	323	1,437	1,690	323	1,437	1,690		
1,250	1,300	98	434	510	98	434	510	4,250	4,300	327	1,454	1,710	327	1,454	1,710		
1,300	1,350	101	451	530	101	451	530	4,300	4,350	331	1,471	1,730	331	1,471	1,730		
1,350	1,400	105	468	550	105	468	550	4,350	4,400	335	1,488	1,750	335	1,488	1,750		
1,400	1,450	109	485	570	109	485	570	4,400	4,450	339	1,505	1,770	339	1,505	1,770		
1,450	1,500	113	502	590	113	502	590	4,450	4,500	342	1,522	1,790	342	1,522	1,790		
1,500	1,550	117	519	610	117	519	610	4,500	4,550	346	1,539	1,810	346	1.539	1,810		
1,550	1,600	120	536	630	120	536	630	4,550	4,600	350							
1,600	1,650	124	553	650							1,556	1,830	350	1,556	1,830		
					124	553	650	4,600	4,650	354	1,573	1,850	354	1,573	1,850		
1,650	1,700	128	570	670	128	570	670	4,650	4,700	358	1,590	1,870	358	1,590	1,870		
1,700	1,750	132	587	690	132	587	690	4,700	4,750	361	1,607	1,890	361	1,607	1,890		
1,750	1,800	136	604	710	136	604	710	4,750	4,800	365	1,624	1,910	365	1,624	1,910		
1,800	1,850	140	621	730	140	621	730	4,800	4,850	369	1,641	1,930	369	1,641	1,930		
1,850	1,900	143	638	750	143	638	750	4,850	4,900	373	1,658	1,950	373	1,658	1,950		
1,900	1,950	147	655	770	147	655	770	4,900	4,950	377	1,675	1,970	377	1,675	1,970		
1,950	2,000	151	672	790	151	672	790	4,950	5.000	382	1,692	1,990	382	1,692	1,990		
2,000	2,050	155	689	810	155	689	810	5,000	5,050	382	1,709	2,010	382	1,709	2,010		
2,050	2,100	159	706	830	159	706	830	5,050	5,100	382	1,726	2,030	382	1,726	2,030		
2,100	2,150	163	723	850	163	723	850	5,100									
2,150	2,200	166	740	870	166	740	870		5,150	382	1,743	2,050	382	1,743	2,050		
2,200	2,250	170	740 757		170			5,150	5,200	382	1,760	2,070	382	1,760	2,070		
				890		757	890	5,200	5,250	382	1,777	2,090	382	1,777	2,090		
2,250	2,300	174	774	910	174	774	910	5,250	5,300	382	1,794	2,110	382	1,794	2,110		
2,300	2,350	178	791	930	178	791	930	5,300	5,350	382	1,811	2,130	382	1,811	2,130		
2,350	2,400	182	808	950	182	808	950	5,350	5,400	382	1.828	2,150	382	1.828	2,150		
2,400	2,450	186	825	970	186	825	970	5,400	5,450	382	1,845	2,170	382	1,845	2,170		
2,450	2,500	189	842	_990 [189	842	990	5,450	5,500	382	1,862	2,190	382	1,862	2,190		
2,500	2,550	193	859	1,010	193	859	1,010	5,500	5,550	382	1,879	2,210	382	1,879	2,210		
2,550	2,600	197	876	1,030	197	876	1,030	5,550	5,600	382	1,896	2,230	382	1,896	2,230		
2,600	2,650	201	893	1,050	201	893	1,050	5,600	5,650	382	1,913	2,250	382		2,250		
2,650	2,700	205	910	1,070	205	910		5,650 5,650						1,913			
2,700	2,750						1,070		5,700	382	1,930	2,270	382	1,930	2,270		
		208	927	1,090	208	927	1,090	5,700	5,750	382	1,947	2,290	382	1,947	2,290		
2,750	2,800	212	944	1,110	212	944	1,110	5,750	5,800	382	1,964	2,310	382	1,964	2,310		
2,800	2,850	216	961	1,130	216	961	1,130	5,800	5,850	382	1,981	2,330	382	1,981	2,330		
2,850	2,900	220	978	1,150	220	978	1,150	5,850	5,900	382	1,998	2,350	382	1,998	2,350		
2,900	2,950	224	995	1,170	224		1,170	5,900	5,950	382	2,015	2,370	382	2,015	2,370		
2,950	3,000	228	1,012	1,190	228	1,012	1,190	5,950	6,000	382		2,390	382	2.032	2,390		
					 												

(Continued on page 52)

		1	Ал	d your filis	ng særus	3 15		ł		L	A	id your fill	id arama	15	
if the amount you are looking up from the worksheet is		Single, head of household, or qualifying widow(er) and you have— No One Two			Marri you h	ed filing joi ave—	intly and	If the amou looking up	orquali	fying wido	ousehold, ow(er) and				
					No	One	Two	worksheet is—		No One Two children child children			No One Two		
At least 1	But less than	children child children				children child children		At least	But less than		our credi		Your credit is—		
6,000	6,050	382	2.049	2,410	382	2,049	2,410	9,500	9,550	130	2,547	3,810	207	2,547	3,8
6,050	6,100	382	2,066	2,430	382	2,066	2,430	9,550	9,600	127	2,547	3,830	203	2,547	3,8
6,100	6,150	382	2,083	2,450	382	2,083	2,450	9,600	9,650	123	2,547	3,850	199	2,547	3,8
6,150	6,200	382	2,100	2,470	382	2,100	2,470	9,650	9,700	119	2,547	3,870	195 192	2,547 2,547	3,8 3.8
6,200 6,250	6,250 6,300	382 379	2,117 2,134	2,490 2,510	382 382	2,117 2,134	2,490 2,510	9,700 9,750	9,750 9,800	115 111	2,547 2,547	3,890 3,910	188	2,547	3,9
6,300	6,350	375	2,151	2,530	382	2,151	2,530	9,800	9,850	107	2,547	3,930	184	2,547	3,9
6,350	6,400	371	2,168	2,550	382	2,168	2,550	9,850	9,900	104	2,547	3,950	180	2,547	3,9
6,400	6,450	368	2,185	2,570	382	2,185	2,570	9,900	9,950	100	2,547	3,970	176	2,547	3,9
6,450	6,500	364	2,202	2,590	382	2,202	2,590	9,950	10,000	96 92	2,547 2,547	3,990 4,010	173_ 169	2,547 2,547	3,9 4,0
6,500 6,550	6,550 6,600	360 356	2,219 2,236	2,610 2,630	382 382	2,219 2,236	2,610 2,630	10,000 10,050	10,050 10,100	92 88	2,547	4,030	165	2,547	4.0
6,600	6,650	352	2,253	2,650	382	2,253	2,650	10,100	10,150	85	2,547	4,050	161	2,547	4,0
6,650	6,700	348	2,270	2,670	382	2,270	2,670	10,150	10,200	81	2,547	4,070	157	2,547	4,0
6,700	6,750	345	2,287	2,690	382	2,287	2,690	10,200	10,250	77	2,547	4,090	153	2,547 2,547	4,0 4,1
6,750	6,800	341	2,304	2,710	382	2,304	2,710	10,250 10,300	10,300 10,350	73 69	2,547 2,547	4,110 4,130	150 146	2,547	4,1
6,800 6,850	6,850 6,900	337 333	2,321 2,338	2,730 2,750	382 382	2,321 2,338	2,730 2,750	10,350	10,400	65	2,547	4,150	142	2,547	4,1
6,900	6,950	329	2,355	2,770	382	2,355	2,770	10,400	10,450	62	2,547	4,170	138	2,547	4,
6,950	7,000	326	2,372	2,790	382	2,372	2,790	10,450	10,500	58	2,547	4,190	134	2,547	4,1
7,000	7,050	322	2,389	2,810	382	2,389	2,810	10,500	10,550	54	2,547	4,204	130	2,547 2,547	4,2 4,2
7,050	7,100	318	2,406	2,830	382	2,406 2,423	2,830	10,550 10,600	10,600 10,650	50 46	2,547 2,547	4,204 4,204	127 123	2,547	4,2
7,100 7,150	7,150 7,200	314 310	2,423 2,440	2,850 2,870	382 382	2,423	2,850 2,870	10,650	10,700	42	2,547	4,204	119	2,547	4.2
7,200	7,250	306	2,457	2.890	382	2,457	2,890	10,700	10,750	39	2,547	4,204	115	2,547	4,2
7,250	7,300	303	2,474	2,910	379	2,474	2,910	10,750	10,800	35	2,547	4,204	111	2,547	4,2
7,300	7,350	299	2,491	2,930	375	2,491	2,930	10,800	10,850	31	2,547	4,204	107	2,547	4,2
7,350	7,400	295	2,508	2,950	371	2,508	2,950	10,850 10,900	10,900 10,950	27 23	2,547 2,547	4,204 4,204	104 100	2,547 2,547	4,2 4,2
7,400 7,450	7,450 7,500	291 287	2,525 2,547	2,970 2,990	368 364	2,525 2,547	2,970 2,990	10,950	11.000	20 20	2,547	4,204	96	2,547	4,2
7,500	7,550	283	2,547	3,010	360	2,547	3,010	11,000	11,050	16	2,547	4,204	92	2,547	4,2
7,550	7,600	280	2,547	3,030	356	2,547	3,030	11,050	11,100	12	2,547	4,204	88	2,547	4,2
7,600	7,650	276	2,547	3,050	352	2,547	3,050	11,100	11,150	8	2,547	4,204	85	2,547	4,2
7,650	7,700	272	2,547	3,070	348	2,547	3,070	11,150	11,200 11,250	4	2,547	4,204 4,204	81 77	2,547 2,547	4,2 4,2
7,700 7,750	7,750 7,800	268 264	2,547 2,547	3,090	345 341	2,547 2,547	3,090 3,110	11,200 11,250	11,300	0	2,547 2,547	4,204	73	2,547	4,2
7,800	7,850	260	2,547	3,130	337	2,547	3,130	11,300	11,350	ō	2,547	4,204	69	2,547	4,2
7,850	7,900	257	2,547	3,150	333	2,547	3,150	11,350	11,400	0	2,547	4,204	65	2,547	4,2
7,900	7,950	253	2,547	3,170	329	2,547	3,170	11,400	11,450	0	2,547	4,204	62	2,547	4,2
7,950	8,000	249	2,547	3,190	326	2,547	3,190	11,450	11,500 11,550	0	2,547 2,547	4,204 4,204	<u>58</u> 54	2,547 2,547	4,2
8,000 8,050	8,050 8,100	245 241	2,547 2,547	3,210 3,230	322 318	2,547 2,547	3,210 3,230	11,500 11,550	11,600	Ö	2,547	4,204	50	2,547	4.2
8,100	8,150	238	2,547	3,250	314	2,547	3,250		11,650	ŏ	2,547	4,204	46	2,547	4,2
8,150	8,200	234	2,547	3,270	310	2,547	3,270	11,650	11,700	0	2,547	4,204	42	2,547	4,2
8,200	8,250	230	2,547	3,290	306	2,547	3,290	11,700	11,750	0	2,547	4,204	39	2,547	4,2
8,250	8,300	226	2,547	3,310	303	2,547	3,310	11,750	11,800	0	2,547 2,547	4,204 4,204	35 31	2,547 2,547	4,2 4,2
8,300 8,350	8,350 8,400	222 218	2,547 2,547	3,330 3,350	299 295	2,547 2,547	3,330 3,350		11,850 11,900	0	2,547	4,204	27	2,547	4,2
8,400	8,450	215	2,547	3,370	291	2,547	3,370	11,900	11,950	ő	2,547	4,204	23	2,547	4,2
8,450	8,500	211	2,547	3,390	287	2,547	3,390	11,950	12,000	0	2,547	4,204	20	2,547	4,2
8,500	8,550	207	2,547	3,410	283	2,547	3,410	12,000	12,050	0	2,547	4,204	16	2,547	4,2
8,550 8,600	8,600 8,650	203 199	2,547 2,547	3,430	280 276	2,547 2,547	3,430 3,450		12,100 12,150	0	2,547 2,547	4,204	12 8	2,547 2,547	4,2 4,2
8,650	8,700	195	2,547	3,450	272	2,547	3,470		12,200	Ö	2,547	4,204	4	2,547	4,2
8,700	8,750	192	2,547	3,490	268	2,547	3,490	12,200	12,250	0	2,547	4,204	*	2,547	4,2
8,750	8,800	188	2,547	3,510	264	2,547	3,510	12,250	13,750	0	2,547	4,204	0	2,547	4,2
8,800	8,850	184	2,547	3,530	260 257	2,547	3,530	13,750 13,800		0	2,539 2,531	4,195 4,184	0	2,547 2,547	4,2 4,2
8,850 8,900	8,900 8,950	180 176	2,547 2,547	3,550 3,570	257 253	2,547 2,547	3,550 3,570	13,850		0	2,523	4,173	Ö	2,547	4,2
8,950	9,000	173	2,547	3,590	249	2,547	3,590		13,950	ŏ	2,515	4,163	ő	2,547	4,2
	9,050	169	2,547	3,610	245	2,547	3,610	13,950	14,000	0	2,507	4,152	0	2,547	4,2
9,050	9,100	165	2,547	3,630	241	2,547	3,630	14,000		0	2,499	4,142	0	2,547	4,2
	9,150	161	2,547	3,650	238	2,547	3,650	14,050		0	2,491	4,131	0	2,547	4,2
	9,200 9,250	157 153	2,547 2,547	3,670	234 230	2,547 2,547	3,670 3,690	14,100 14,150		0	2,483 2,475	4,121 4,110	0	2,547 2,547	4,2
	9,300	150	2,547	3,710	226	2,547	3,710	14,200		- 0 -	2,467	4,100	- 0 -	2,547	4,2
9,300	9,350	146	2,547	3,730	222	2,547	3,730	14,250	14,300	0	2,460	4,089	0	2,547	4,2
	9,400 9,450	142	2,547 2,547	3,750 3,770	218 215	2,547 2,547	3,750 3,770	14,300 14,350		0	2,452	4,079 4,068	0	2,547 2,547	4,20
9,400		138								0	2,444				

"If the amount you are looking up from the worksheet is at least \$11,200 (\$12,200 if married filing jointly) but less than \$11,230 (\$12,230 if married filing jointly), your crodit is \$1. Otherwise, you cannot take the credit.